

NOTICE OF HMIS DATA ENTRY AND PERSONAL PRIVACY

What is the Homeless Management Information System (HMIS)?

THIS NOTICE DESCRIBES HOW INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

The City of Alexandria homeless prevention and service providers receiving local, state and/or federal funding to assist persons experiencing or at risk of homelessness are required to use a computer database called the Homeless Management Information System (HMIS) to better coordinate and provide services. Therefore, when you request or receive homeless or prevention services from a City of Alexandria homeless prevention or service provider, also known as a Contributing HMIS Organization (CHO), the information you give about yourself and your family is input in the database.

WHAT INFORMATION IS COLLECTED ABOUT YOU & HOW IS IT USED OR SHARED?

There are two types of information we ask for, each with different rules on how and when we can share this information:

1. **Basic Information** - Name, Gender, Social Security Number, Date of Birth, Race, and Ethnicity. (*Sharing this information through the HMIS database helps to prevent duplication of client records. As a recipient of assistance and/or services you are authorizing the service provider to enter and share the above Basic Identifying Information.*)
2. **Case Information** (HUD Universal Data Elements, Program Entry/Exit, Homelessness Prevention and Rapid Re-Housing Data Elements and Services) including family composition, employment history, income, financial resources, assistance and benefits, military duty status, prior living situation, length of stay, zip code of last permanent address, housing status, homeless status, phone numbers, disability, etc. (*Sharing this information helps better identify needs in the community, assess the benefit of services provided, and expedite referrals for needed services. This information is shared only with your written authorization through reading and signing the Consent to Authorize Contributing HMIS Organization Data Sharing.*)

HOW WILL YOUR INFORMATION BE KEPT SECURE?

The following measures have been taken to ensure that your information is kept safe and secure:

- CHOs must abide by relevant local, state and/or federal laws protecting client data;
- HMIS users receive confidentiality and privacy protection training and agree to obey rules before using HMIS;
- HMIS policies and procedures establish additional protections for client data including requirements for hardware, software, security, confidentiality, and training;
- Data is entered into HMIS via a secure and encrypted internet connection and stored on a secured server; and
- Any information that could identify you, like your name or birthdate, will be viewed only by other authorized HMIS users, and will be removed from reports before they are issued to local, state, or federal agencies;

WHAT ARE YOUR PRIVACY RIGHTS?

You have the following rights:

1. **To Read Your Record** – At your written request the organization's HMIS Administrator listed below, will print a copy of your HMIS record contents entered by the organization or when applicable assist you in viewing them.
2. **To Request a Correction be Made to Your Record** – If you believe that information in your HMIS record is incorrect or inaccurately reflects your current or past situation you may request a correction. Your record will be updated upon your submission of any supporting documentation and a written request to the organization's HMIS Administrator listed below identifying the error and the correction.
3. **To Refuse Consent To Share Case Information** – You will not be denied services for which you otherwise qualify if you refuse to sign the Authorization for Contributing HMIS Organization to Share Information. Please note Case Information will still be entered into the HMIS system for statistical purposes, but will not be shared.
4. **To Withdraw Your Consent** – Your authorization to share information can be withdrawn at any time upon written notification to the organization's HMIS Administrator listed below. Please note Case Information will not be shared with any other community service providers effective 24 hours or the next business after receipt of your written notification to withdraw authorization.
5. **To File a Complaint** – You may file a written complaint with the organization's HMIS Agency Administrator listed below if you have an indication that your privacy rights have been violated. You will not be penalized or denied services for filing a complaint.

For more information, please contact:

Jessica Lurz, Homeless Services Coordinator (703) 746-5973

Name, Title & Phone Number